EV633261929

PTO/SB/17 (12-04) Approved for use through 07/31/2006. OMB 0651-0032

Under ## Panery	vork Reduction Act	of 1995, no ne	ersons are required to r				; U.S. DEPAR' it displays a va		
Effective on 12/08/2004.					Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application I	Number	10/671,922			
FEE TRANSMITTAL				Filing Date		September 24, 2003			
For FY 2005				First Named	Inventor	Derderian			
				Examiner Na	ame	L. Gurley			
Applicant cl	aims small entity	status. See	37 CFR 1.27	Art Unit		2812			
TOTAL AMOUN	T OF PAYMENT	(\$)	790	Attorney Do	cket No.	MI22-2	296		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
. —	arge fee(s) indica				narge fee(s)	indicated be	∍low, except	for the fi	ling fee
<u> </u> <u> </u> <u> </u> <u> </u>	der 37 CFR 1.16	and 1.17	underpayments of fo	المما	redit any ove				
WARNING: Informa	ation on this form	may become ;	public. Credit card in	nformation shou	ild not be inc	luded on this	i form. Provid	le credit ca	ırd
FEE CALCUL		J-2036.				.			····
		AND EYAL	ANATION FEES						
1. BASIC FILI		AND EXAM LING FEES	MINATION FEES SEAI	RCH FEES	EXAM	NOITANIN	FEES		
Application *		Small E	Entity	Small Entit	ty	Small E	ntity	Fees Pa	i4 (\$)
Application 1					<u>Fee</u>			79	
Utility - R					200		-	13	<u>U</u>
Design Plant	20 20	_			130				
		_			160				
Reissue	30				600				
Provisional 2. EXCESS CL	20	00 100	0	0	C) (-		
Fee Description								Fee (\$)	Small Entity Fee (\$)
Each claim over	r 20 or, for Rei		claim over 20 an					50	25
		or, for Re	issues, each indep	pendent claim	n more thar	n in the ori	ginal paten		100
Multiple depend Total Claims		Claims	Fee (\$) Fee	e Paid (\$)	Multir	ole Depend	ent Claims	360	180
	O or HP = (0		<u>e (\$)</u>	Fee Paid	<u>(\$)</u>	
HP = highest num	ber of total claims	paid for, if grea	ater than 20	- 1.1 (A)					
Indep. Claims 1 3		Claims) x	Fee (\$) Fee	<u>Paid (\$)</u>			-		
HP = highest num	ber of independent	claims paid fo	or, if greater than 3	U					
3. APPLICATION				_				_	
			d 100 sheets of pa					25 for sm	all entity)
			ction thereof. See					Fee	Paid (\$)
	Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other:		·,		, ,		<u> </u>			
SUBMITTED BY									-
Signature				Registration N	No. 38	533	Telephone5	09-624	-4276

SUBMITTED BY								
Signature	P,	Registration No. (Attorney/Agent) 38,533	Telephone 509 - 624 - 4276					
Name (Print/Type)	David G. Latwesen, Ph.D.		Date 2/3/6					

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.